

17 JAN 2006

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT International Applications)		ATTORNEY'S DOCKET NUMBER MARGI-43																									
<p>As a below named inventor, I hereby declare that:</p> <p>My residence, post office address and citizenship are as stated below next to my name.</p> <p>I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:</p> <p><b>LIQUID SUPPLYING APPARATUS FOR VENDING MACHINE</b></p> <p>the specification of which (check only one item below):</p> <p><input type="checkbox"/> is attached hereto.</p> <p><input type="checkbox"/> was filed as United States application</p> <p>Serial No. _____</p> <p>on _____</p> <p>and was amended</p> <p>on _____ (if applicable).</p> <p><input checked="" type="checkbox"/> was filed as PCT international application</p> <p>Number <u>PCT/IT2002/000725</u></p> <p>on <u>November 15, 2002</u>.</p> <p>and was amended under PCT Article 19</p> <p>on _____ (if applicable).</p> <p>I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.</p> <p>I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR § 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.</p> <p>I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="width: 25%;">PRIOR FOREIGN APPLICATION NUMBER(S)</th> <th style="width: 25%;">COUNTRY</th> <th style="width: 25%;">FOREIGN FILING DATE (MM/DD/YYYY)</th> <th style="width: 25%;">PRIORITY NOT CLAIMED</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td> </td><td> </td><td> </td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td> </td><td> </td><td> </td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td> </td><td> </td><td> </td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td> </td><td> </td><td> </td><td style="text-align: center;"><input type="checkbox"/></td></tr> </tbody> </table>				PRIOR FOREIGN APPLICATION NUMBER(S)	COUNTRY	FOREIGN FILING DATE (MM/DD/YYYY)	PRIORITY NOT CLAIMED				<input type="checkbox"/>				<input type="checkbox"/>				<input type="checkbox"/>				<input type="checkbox"/>				<input type="checkbox"/>
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<p>POWER OF ATTORNEY: As a named inventor, I hereby appoint the attorneys and agents at <u>Millen, White, Zelano &amp; Branigan, PC</u> that are associated with Customer Number <u>23599</u> to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; border: none;">Send Correspondence to: Customer No. <u>23599</u></td> <td style="width: 33%; border: none;">Telephone No. 703/243-6333</td> <td style="width: 33%; border: none;">Direct Telephone Calls to: Anthony J. Zelano</td> </tr> </table>				Send Correspondence to: Customer No. <u>23599</u>	Telephone No. 703/243-6333	Direct Telephone Calls to: Anthony J. Zelano																					
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Combined Declaration for Patent Application and Power of Attorney (Continued)  
(Includes Reference to PCT International Applications)ATTORNEY'S DOCKET NUMBER  
MARGI-43

1-00201	FULL NAME OF INVENTOR	FAMILY NAME DOGLIONI MAJER	FIRST GIVEN NAME Andrea	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Milan	STATE OR FOREIGN COUNTRY ITALY ITX	COUNTRY OF CITIZENSHIP ITALY
	POST OFFICE ADDRESS	STREET Via Vincenzo Monti, 57	CITY Milan	STATE & ZIP CODE/COUNTRY ITALY, I-20154
202	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
203	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
204	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
205	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
206	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
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207	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY

**Combined Declaration for Patent Application and Power of Attorney (Continued)**  
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	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
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	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
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	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
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	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 207	DATE	SIGNATURE OF INVENTOR 207	DATE
SIGNATURE OF INVENTOR 202	DATE	SIGNATURE OF INVENTOR 208	DATE
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